

One East Broward
Suite 1609
Fort Lauderdale, Florida
(954) 315-5044 Telephone
(954) 315-5045 Telecopier

RECEIVED
CENTRAL FAX CENTER

MAR 04 2005

Lott & Friedland, P.A.

Fax

To: USPTO
Commissioner for Patents

From: Rick Comoglio, USPTO Reg. No.: 40,963

Attn: Mail Stop Amendment

Pages: 3 (Including Cover Page)

Fax: 703-872-9306

Date: *March 4, 2005*

Re: Power of Attorney and Statement under 37 CFR CC:

3.73(b) for Patent Application No.: 10/717,368

☐ Urgent

☐ For Review

☐ Please Comment

☐ Please Reply

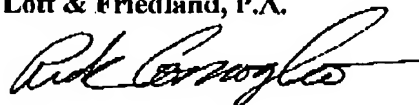
Message:

Please accept the attached Power of Attorney and Statement under 37 CFR 3.73(b) for Patent Application No. 10/717,368.

Attorney Docket No.: 07086-1-007000

Regards,

Lott & Friedland, P.A.



By: Rick Comoglio

USPTO Reg, No.: 40,963

NOTE: The information contained in this facsimile message may be privileged or confidential information. It is intended only for the use of the individual or entity named above. If the reader of this message is not the intended recipient, or the employer or agent responsible for delivery of it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is neither intended nor permissible. If you have received this communication in error, please immediately notify us by telephone at the above number (call collect), and return the original you receive to us at the above address via the U.S. postal service.

**RECEIVED
CENTRAL FAX CENTER**

MAR 04-2005 10:08 From:

9545243441

To: USPTO

P.2/3

MAR 0 4 2005

PTO/SB/31 (08-03)

Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	10/717,368
	Filing Date	11/19/2003
	First Named Inventor	Laver, James
	Title	HEMOSTASIS VALVE AND METHOD OF USING A HEMOSTASIS VALVE
	Art Unit	Not Yet Assigned
	Examiner Name	Not Yet Assigned
	Attorney Docket Number	07086-1-007000

I hereby appoint:

☒ Practitioners associated with the Customer Number: 35996

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number.

OR

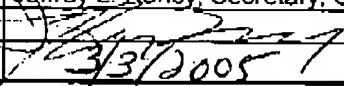
<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City	State	Zip	
Country			
Telephone	Fax		

I am the:

☐ Applicant/Inventor

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Jeffrey L. Raney, Secretary, GMP Cardiac Care, Inc.		
Signature			
Date	3/3/2005	Telephone	954-745-3510

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/96 (08-00)

Approved for use through 10/31/2002. OMD 0651-0031

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: GMP Cardiac Care, Inc.Application No./Patent No.: 10/717,368 Filed/Issue Date: 11/19/2003Entitled: HEMOSTASIS VALVE AND METHOD OF USING A HEMOSTASIS VALVEGMP Cardiac Care, Inc.

, a

Corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by, percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 014222, Frame 0253, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☐ Copies of assignments or other documents in the chain of title are attached.

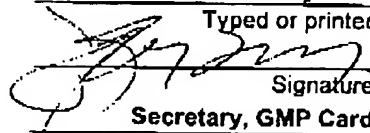
NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

March 3, 2005
Date

Jeffrey L. Raney

Typed or printed name


Signature

Secretary, GMP Cardiac Care, Inc.

Title

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.